



## Poisonous Wild Mushrooms Health Alert

### January 22, 2026

#### Situational Update

California is experiencing an outbreak associated with people foraging and consuming Death Cap (*Amanita phalloides*) and Western Destroying Angel (*Amanita ocreata*) mushrooms leading to severe illness and deaths. Cases have been identified in the Central Coast and Northern California, including Sacramento County.

#### **Actions Requested of Health Care Systems and Clinicians:**

1. **Inquire** about mushroom foraging and consumption among patients with symptoms consistent with mushroom toxicity; careful evaluation for amatoxin poisoning and hospital admission may be needed.
  - Initial symptoms (6-24 hours post-ingestion) include profuse, watery diarrhea and as well as other gastrointestinal (GI) complaints (i.e. nausea, vomiting, abdominal pain). Fluid loss may lead to hypovolemia, acute kidney failure, circulatory shock, and death.
  - Gradual resolution of GI symptoms within 24 hours of onset may suggest toxicity has resolved but elevated liver enzymes are typically seen within 24-36 hours after ingestion.
  - Severely poisoned patients may develop irreversible hepatic failure within 48-96 hours after ingestion, which may be accompanied by acute kidney failure or pancreatitis.
2. **Obtain** early consultation with a medical toxicologist with expertise in managing patients with mushroom poisoning. Contact the California Poison Control System (CPCS) at 1-800-222-1222 to report cases and/or for advice on medical management.
3. **Provide** emergency and supportive care measures:
  - Supportive care measures include fluid resuscitation for hypovolemic shock, correction of electrolyte disturbances associated with fluid loss, elimination enhancement with multiple dose activated charcoal, and supportive care related to liver dysfunction. Gastric emptying by gastric lavage or ipecac is NOT recommended.
  - Antioxidant therapy (i.e. IV acetylcysteine) where there is evidence of hepatotoxicity.
  - Transfer patient to tertiary care center capable of performing liver transplant or other bridging liver failure therapies (e.g., MARS, fractionated plasma separation and adsorption system) if clinical signs of hepatic injury are moderate or severe.
4. **Report** suspected cases immediately to Sacramento County Public Health (SCPH) at (916) 875-5881.
5. **Test** for amatoxin from patient urine or mushrooms consumed by patient to confirm clinical diagnosis. Contact SCPH to coordinate.



Resources:

1. CDPH – Severe illness or fatal liver damage caused by mushroom poisonings in California (1/15/26):  
<https://www.cdph.ca.gov/Programs/OPA/Pages/CAHAN/Increase-in-mushroom-poisonings-in-California.aspx>
2. CDPH – Severe, Potentially Fatal Liver Damage in Children and Adults Associated with Consumption of Foraged Wild Mushrooms (12/5/25):  
<https://www.cdph.ca.gov/Programs/OPA/Pages/CAHAN/Foraged-Wild-Mushrooms.aspx>
3. CDPH – Poisonous Wild Mushrooms:  
<https://www.cdph.ca.gov/Programs/CCDPHP/DEODC/EHIB/Pages/EIS/Poisonous-Mushrooms.aspx>

Sincerely,



Olivia Kasirye, MD, MS  
Public Health Officer



**Table 1. COVID-19, Influenza, and Respiratory Syncytial Virus (RSV) Reporting**

	Influenza	RSV	COVID-19
<b>Hospitalizations</b>	Intensive care unit (ICU) admissions for cases of <b>all ages</b> <sup>1</sup>	Intensive care unit (ICU) admissions for cases <b>age &lt;5</b> <sup>1</sup>	Aggregate counts according to NHSN <sup>3</sup>
<b>Deaths</b>	<b>All ages</b> <sup>1</sup>	<b>Age &lt;5</b> <sup>1</sup>	
<b>Outbreaks</b>	See <a href="#">CORHA Outbreak Definition</a> <sup>2</sup>	≥1 lab-confirmed case + ≥2 acute respiratory illness cases within 72 hours <sup>2</sup>	See <a href="#">CORHA Outbreak Definition</a> <sup>2</sup>
<b>Other</b>	Novel influenza viruses (e.g., H5N1, H7N9) <sup>1</sup>		

1. Report laboratory-confirmed cases electronically to Sacramento County Public Health (SCPH) – via CalREDIE or confidential fax at (916) 854-9709. Medical records (e.g., admission notes, lab results, discharge summary, vaccination info) should be included for **all** ICU and fatal cases (upload to CalREDIE or fax).
2. Report outbreaks on the Outbreak Reporting Module:  
<https://dhs.saccounty.gov/PUB/Pages/Communicable-Disease-Control/Outbreak-Reporting.aspx>  
Council for Outbreak Response: Healthcare Associated Infections and Antimicrobial-Resistant Pathogens (CORHA) Outbreak Definitions
  - Influenza: <https://corha.org/assets/documents/influenza-thresholds-for-reporting-and-investigating-cases.pdf>
  - COVID-19: [https://corha.org/assets/documents/COVID-19-HC-Outbreak-Definition-Guidance\\_January-2024.pdf](https://corha.org/assets/documents/COVID-19-HC-Outbreak-Definition-Guidance_January-2024.pdf)
3. Report aggregate counts according to the National Healthcare Safety Network (NHSN):  
<https://www.cdc.gov/nhsn>.